

1.) CORPORATION NAME:

All Saints Endowment Fund, Incorporated

DUE DATE: **1/23/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CARTER GLASS, IV
1001 HAXALL POINT, 15TH FL
POST OFFICE BOX 1122**

SCC ID NO: **00175075**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
-------	------------

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8787 RIVER ROAD

CITY/ST/ZIP: RICHMOND, VA 23229

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	FRANCES L KAY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	504 KILMARNOCK DRIVE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		

NAME:	JOSEPH K. W. CHANG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	12117 ORMOND DRIVE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23233		

NAME:	THOMAS CRICCHI	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	President/COB		
ADDRESS:	8112 LOWER RALSTON COURT		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		

NAME:	DANA LAW, JR.	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1654 CENTERVILLE PARKE LANE		
CITY/ST/ZIP/CO:	MANAKIN SABOT, VA 23103		

NAME:	JOHN WERNER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	12 COUNTRY SQUIRE LANE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		

NAME:	BRUCE F. WRIGHT	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	800 LAKEWATER DRIVE		
CITY/ST/ZIP/CO:	RICHMOND, VA 23229		

NAME: Fred W. Palmore, III TITLE: SECRETARY ADDRESS: 10741 Cherokee Road CITY/ST/ZIP/CO: Midlothian, VA 23113	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: ANNE BLACKWELL TITLE: DIRECTOR ADDRESS: 9655 UNIVERSITY BOULEVARD CITY/ST/ZIP/CO: RICHMOND, VA 23229	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: BETSY JOLLAY TITLE: DIRECTOR ADDRESS: 311 CHESWICK LANE CITY/ST/ZIP/CO: RICHMOND, VA 23229	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.				
/s/ Fred W.Palmore, III SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	Fred W.Palmore, III, PRINTED NAME AND CORPORATE TITLE	1/23/2014 DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.				